

April 2018 Monthly Report

OMH Facility Performance Metrics and Community Service Investments

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April 2018 Monthly Report:

OMH facility performance metrics and community service investments

Report Overview:

This report is issued pursuant to the State Fiscal Year 2018-19 Budget agreement which requires that "The Commissioner of Mental Health shall provide monthly status reports of the 2018-19 community investments and the impact on inpatient census to the Temporary President of the Senate, the Speaker of the Assembly, and the Chairs of the Senate and Assembly fiscal committees. Such reports shall include state operated psychiatric facility census; occurrence of census exceeding budgeted capacity and reason; occurrence of out of catchment area placements that are due to insufficient capacity in the catchment area hospital; admissions and discharges; rate of Medicaid psychiatric inpatient readmissions to any hospital within thirty days of discharge; Medicaid emergency room psychiatric visits; descriptions of 2018-19 new community service investments; average length of stay; and number of long-term stay patients. Such reports shall include an explanation of any material census reductions, when known to the facility."

This report is comprised of several components:

- 1. State Psychiatric Center (PC) descriptive metrics;
- 2. Description and status of community service investments;
- 3. Psychiatric readmissions to hospitals and emergency rooms for State PC discharges;
- 4. Psychiatric readmissions to hospitals and emergency rooms for Article 28 and Article 31 hospital psychiatric unit discharges.

Statewide Overview of Service Expansion:

Utilization of services developed in SFY 2014-15 through 2016-17 continued to grow during April. Planning is underway for new and enhanced services to be developed with resources funded in the SFY 2017-18 Budget.

Supported housing continued developing and serving new individuals, with 1,500 new individuals served with the expansion capacity through April. Supported housing beds issued in the SFY 2017-18 continued serving new individuals statewide; and requests for proposals to the New York City and Long Island beds were under review during April.

State-operated community services continued expanding their reach through eight facility service regions of the State. Statewide expansion has served over 11,400 new individuals through April, as outlined in the accompanying tables. Programs funded through Aid to Localities, including mobile crisis, Assertive Community Treatment (ACT), and peer crisis respite services, continue with start-up and expansion in all areas of the State. Over 40,500 new individuals have been served in the Aid to Localities-funded programs through April.



Table 1: NYS OMH State Psychiatric Center Inpatient Descriptive Metrics for April, 2018

	Capital Beds	Funded Capacity	Capacity Change ²	Admission	Catchment Area Placements ³	Disc	charge ⁴	Long Stay ⁵	Month	ly Average Daily Census ⁶	
State Inpatient	N	N	N	N	N	N	Days	N	N	N	N
Facilities ¹	Capital Beds as of end of SFY 2017- 18	April, 2018 Funded Capacity	Capacity change from previous month	# of Admissions during April 2018	# of out of catchment area placements during April, 2018	# of Discharges during April 2018	Median Length of Stay for discharges during April 2018	# of Long Stay on census 04/30/2018	Avg. daily census 02/1/2018- 02/28/2018	Avg. daily census 03/1/2018- 03/31/2018	Avg. daily census 04/1/2018- 04/30/2018
Adult											
Bronx	156	156		5		6	112	88	153	155	155
Buffalo	221	157		12		12	134	72	156	157	157
Capital District	158	109		18		17	21	70	109	109	108
Creedmoor	480	333		8		17	152	199	328	325	325
Elmira	104	51		10		15	72	14	51	51	45
Greater Binghamton	178	75		8		4	97	29	72	75	73
Hutchings	132	117	-	10	1	10	395	46	99	98	99
Kingsboro	254	161	-	8	-	7	154	91	159	158	160
Manhattan	476	150		13		15	86	64	148	148	146
Pilgrim	771	277		18		16	188	178	276	276	275
Rochester	222	83		8		10	198	36	83	80	80
Rockland	436	368		16		16	211	233	367	364	364
South Beach	280	237		23		32	276	90	225	226	230
St. Lawrence	84	40		4		8	103	7	40	36	33
Washington Heights	21	21		21		22	21	0	18	19	18
Total	3,973	2,335		182		207	113	1,217	2,282	2,277	2,267
Children & Youth											
Elmira	48	13		6		6	29	4	13	13	12
Greater Binghamton	16	14		13	1	16	25	0	13	14	13
Hutchings	30	23		18	2	18	30	0	19	19	19
Mohawk Valley	32	32	1	38		38	22	1	31	31	32
NYC Children's Center	184	102		28		22	110	46	91	90	89
Rockland CPC	56	20		14		14	32	3	19	20	20
Sagamore CPC	77	54		11		10	76	14	42	40	41
South Beach	12	11		2		3	119	3	9	11	10
St. Lawrence	29	28		26	6	29	26	0	28	28	28
Western NY CPC	46	46		10	1	8	99	6	41	41	43
Total	530	343		166		164	32	77	306	308	307
Forensic											
Central New York	450	179		25		23	91	20	110	99	100
Kirby	220	193		28		26	96	83	189	190	191
Mid-Hudson	340	288		38		38	104	151	284	280	281
Rochester	84	84		4		2	237	54	84	84	84
Total	1,094	744		95		89	96	308	666	653	656
Updated as of May 4, 2018	.,	1									

- 1. Research units and Sexual Offender Treatment Programs (SOTP) were excluded.
- 2. Capacity increases in this report for Mohawk Valley reflect a temporary increase associated with need that exceeds previously-funded bed levels. Staffing levels are adjusted as needed to accommodate such changes.
- 3. Catchment area placements are defined as: The number of individuals referred to this facility but admitted outside of its catchment area due to insufficient capacity at the time of referral.
- 4. Discharge includes discharges to the community and transfers to another State IP facility.
- 5. Long Stay is defined as: Length of stay over one year for adult and forensic inpatients, and over 90 days for child inpatients.
- 6. Monthly Average Daily Census defined as: Total number of inpatient service days for a month divided by the total number of days in the month. Population totals displayed may differ from the sum of the facility monthly census values due to rounding.



OMH Facility	Target Population	Prior Capacity ¹	Reinvestment Expansion	Annualized Reinvestment	Allocated	New Individual Served
Own 11 actility	Tranget Population		Waiver Slots	TOTAL GOUNGING	Allocated	, Jeiveu
	-	псвз	Waiver Sidis			
Greater Binghamton	Children	60	12	\$315,516	\$315,516	58
Imira	Children	90	12	\$315,516	\$315,516	28
t. Lawrence	Children	78	12	\$315,516	\$315,516	38
agamore	Children	192	60	\$1,488,240	\$1,488,240	201
/estern NY	Children	110	24	\$631,032	\$631,032	91
Rochester Iew York City	Children Children	100 600	78	\$1,749,440	\$1,749,440	- 145
Rockland	Children	177	30	\$323,118	\$323,118	118
lutchings	Children	72	18	\$473,274	\$473,274	55
	Subtotal	1,479	246	\$5,611,652	\$5,611,652	734
		Supported H	ousing Beds			
Na atau Dinahamtan	A divite	200	I 00 I	PC07 C04	¢c07.c04	144
Freater Binghamton	Adults	289	88	\$687,604	\$687,604 \$694,022	144
Elmira St. Lawrence	Adults	517 306	82 55	\$694,022 \$423,442	\$423,442	106 92
	Adults		208			
ilgrim uffalo	Adults	2,245		\$3,261,802	\$2,761,972 \$947,324	199
	Adults	1,196	112	\$947,324		165
ochester ew York City	Adults Adults	555 8 776	125 364	\$1,055,947 \$5,717,752	\$1,055,947 \$4,551,482	186
ew York City ockland	Adults	8,776	364 145	\$5,717,752 \$1,959,774	\$4,551,482 \$1,858,774	272 174
apital District PC	Adults Adults	1,841 659	145 84	\$1,858,774 \$599,855	\$1,858,774 \$599,855	91
Jutchings	Adults	837	42	\$324,960	\$324,960	71
	Subtotal	17,221	1,305	\$15,571,482	\$13,905,382	1,500
		State-Co	mmunity			
Greater Binghamton						
reater Binghamton				\$5,740,000	\$4,378,500	4,063
				PO 000 400	\$2.720.460	2.040
t. Lawrence				\$2,806,160	\$2,736,160 \$1,820,000	2,048
agamore ilgrim				\$3,570,000	\$1,750,000	1,573 896
/estern NY				\$1,050,000	\$1,050,000	860
uffalo				\$490,000	\$490,000	227
cochester				\$2,145,440	\$2,145,440	763
lew York City				\$2,660,000	\$1,470,000	543
Rockland					\$280,000	31
Capital District PC				\$770,000	\$420,000	49
Hutchings				\$1,068,400	\$1,068,400	445
	Subtotal			\$20,300,000	\$17,608,500	11,498
	-	Aid to Lo	ocalities			
Greater Binghamton				#4.045.000	\$954,921	3,271
Imira				\$1,815,000	\$703,574	1024
t. Lawrence				\$681,000	\$680,998	3,212
agamore						114
ilgrim				\$5,866,000	\$5,512,338	4,708
Vestern NY				_	-	
Buffalo				\$2,548,000	\$2,672,712	3,457
Rochester				\$3,173,000	\$3,173,000	1694
lew York City				\$7,432,000	\$7,430,938	1448
lockland					\$4,228,116	6,673
apital District PC				\$5,740,000	\$430,000	36
lutchings				\$1,077,000	\$1,077,000	868
	Subtotal			\$28,332,000	\$26,863,597	26,505
		State	wide			
uicide Prevention, Forensics a	nd Sustained Engagement			\$2,500,000	\$2,500,000	N/A
esidential Stipend Adjustment				\$5,725,636	\$5,725,636	IN/A
eer Specialist Certification				N/A	N/A	114
NF Transition Supports				\$5,500,000	\$5,500,000	131
	Subtotal			\$13,725,636	\$13,725,636	
		2017 19 Investm	nents Available*			
		2017-16 IIIVeStil			*Allocated funds for SF	Y 2017-18 will be
aid to Localities		2017-16 IIIVeStil		\$8 444 000	distributed by facility se	rvice area upon
aid to Localities	-	2017-16 Hivesui		\$8,444,000 \$8,444,000	distributed by facility se approval of local and re	
id to Localities TOTAL TRANSFORM	MATION	2017-10 investi	[
	MATION	Article 28/31 F	 Reinvestment	\$8,444,000	approval of local and re	gional plans.
TOTAL TRANSFORM		Article 28/31 F		\$8,444,000 \$91,984,770	approval of local and re	gional plans. 40,482
TOTAL TRANSFORM	Child & Adult	Article 28/31 F	N/A	\$8,444,000 \$91,984,770 \$894,275	\$77,714,767 \$894,275	gional plans. 40,482 2,577
TOTAL TRANSFORM St. James Mercy (WNY) fledina Memorial (WNY)	Child & Adult Adults	Article 28/31 F N/A N/A	N/A N/A	\$8,444,000 \$91,984,770 \$894,275 \$199,030	\$77,714,767 \$77,714,767 \$894,275 \$199,030	40,482 2,577 909
TOTAL TRANSFORM st. James Mercy (WNY) fledina Memorial (WNY) flolliswood/Stony Lodge/Mt Sina	Child & Adult Adults i (NYC) Child & Adult	Article 28/31 F N/A N/A N/A	N/A N/A N/A	\$8,444,000 \$91,984,770 \$894,275 \$199,030 \$10,254,129	\$77,714,767 \$77,714,767 \$894,275 \$199,030 \$10,254,129	2,577 909 1,852
total transform it. James Mercy (WNY) dedina Memorial (WNY) folliswood/Stony Lodge/Mt Sine itony Lodge/Rye (Hudson River	Child & Adult Adults i (NYC) Child & Adult) Child & Adult	Article 28/31 F N/A N/A	N/A N/A	\$8,444,000 \$91,984,770 \$894,275 \$199,030 \$10,254,129 \$4,634,577	\$77,714,767 \$77,714,767 \$894,275 \$199,030 \$10,254,129 \$4,634,577	2,577 909 1,852 5,164
t. James Mercy (WNY) ledina Memorial (WNY) olliswood/Stony Lodge/Mt Sina tony Lodge/Rye (Hudson River BMC/NSUH/PK (Long Island)	Child & Adult Adults i (NYC) Child & Adult	Article 28/31 F N/A N/A N/A N/A	N/A N/A N/A N/A	\$8,444,000 \$91,984,770 \$894,275 \$199,030 \$10,254,129	\$77,714,767 \$77,714,767 \$894,275 \$199,030 \$10,254,129	2,577 909 1,852
St. James Mercy (WNY) fledina Memorial (WNY) folliswood/Stony Lodge/Mt Sina stony Lodge/Rye (Hudson River BMC/NSUH/PK (Long Island)	Child & Adult Adults i (NYC) Child & Adult) Child & Adult Child & Adult Child & Adult	Article 28/31 F N/A N/A N/A N/A	N/A N/A N/A N/A	\$8,444,000 \$91,984,770 \$894,275 \$199,030 \$10,254,129 \$4,634,577 \$2,910,400 \$18,892,411	\$77,714,767 \$77,714,767 \$894,275 \$199,030 \$10,254,129 \$4,634,577 \$2,910,400 \$18,892,411	2,577 909 1,852 5,164 3,522 14,024
TOTAL TRANSFORM i. James Mercy (WNY) edina Memorial (WNY) olliswood/Stony Lodge/Mt Sinatory Lodge/Rye (Hudson Rivers BMC/NSUH/PK (Long Island)	Child & Adult Adults i (NYC) Child & Adult) Child & Adult Child & Adult Child & Adult	Article 28/31 F N/A N/A N/A N/A	N/A N/A N/A N/A	\$8,444,000 \$91,984,770 \$894,275 \$199,030 \$10,254,129 \$4,634,577 \$2,910,400	\$77,714,767 \$77,714,767 \$894,275 \$199,030 \$10,254,129 \$4,634,577 \$2,910,400	2,577 909 1,852 5,164 3,522

^{1.} Prior capacity refers to the program capacity at the end of State fiscal year 2013-14; before Transformation investments began.



			Table 3a	: Greater Bir	nghamton Health Center			
					Investment P	lan Progress		
Service	Target Population	County	Prior Capacity	Reinvestment Expansion (units)	Status Update	Start Up Date	New Individuals Served	Annualized Reinvestment Amount (\$)
HCBS Waiver	Children	Broome	24	6	Ciaias opaais	4/1/2014	32	\$157.758
HCBS Waiver	Children	Tioga	6	6		6/5/2014	26	\$157,758
SUBTOTAL:		9	30	12			58	\$315,516
Supported Housing	Adult	Broome	161	53		8/1/2014	105	\$407,856
Supported Housing	Adult	Chenango	46	8		10/1/2014	9	\$61,568
Supported Housing	Adult	Delaware	27	6		1/1/2016	1	\$46,218
Supported Housing	Adult	Otsego	30	8		6/1/2015	8	\$62,424
Supported Housing	Adult	Tioga	25	3		7/1/2015	7	\$25,278
Supported Housing	Adult	Tompkins	0	10		11/1/2014	14	\$84,260
SUBTOTAL:			289	88			144	\$687,604
State Resources:			N/A					
Mobile Integration Team ¹	Adults & Children	Southern Tier Service Area	IN/A	38.35 FTEs		6/1/2014	3,371	\$1,342,250
Clinic Expansion ¹	Adult	Southern Tier Service Area		7.2 FTEs		1/1/2015	351	\$252,000
OnTrack NY Expansion	Adult	Southern Tier Service Area		3 FTE		2/2/2017	16	\$210,000
SUBTOTAL:							3,738	\$1,804,250
Aid to Localities:		Eastern Southern Tier Service Area	N/A	N/A				
Crisis Intervention Team (CIT)	Adults & Children	Broome				9/14/2015	2,257	\$80,400
Engagement & Transitional Support Services Program	Adults & Children	Chenango &				12/28/2015	253	\$160,800
Family Stabilization Program	Children	Delaware Otsego						<u> </u>
Warm Line Program	Adult	Tioga				6/27/2016	33 60	\$80,400
Drop-In Center	Adult	Tioga				6/11/2016 11/1/2015	97	\$35,040 \$45,360
Crisis Stabilization Team	Adult	Broome				4/30/2018	0	\$80,000
Peer-In-Home Companion Respite	Adult	Broome				8/1/2017	81	\$42,000
Enhanced Outreach Services	Adults &					0/1/2017	01	\$42,000
	Children	Chenango				8/1/2017	63	\$80,000
Enhanced Outreach Services	Adults & Children	Delaware				8/1/2017	425	\$80,000
Enhanced Child & Family Support Services	Children	Otsego			Funding has been made available on the county State Aid Letter, and is effective July 1, 2017.		N/A	\$54,958
System Monitoring Support	Adult & Children	Otsego				9/1/2017	N/A	\$25,042
Crisis/Respite Program Expansion ²	Adults	Tompkins	<u> </u>			1/1/2018	2	\$190,921
SUBTOTAL:							3,271	\$954,921

State Resources - In I	Development:		\$1,306,971
	TOTAL:	7.211	\$5.069.262

^{1.} State Resources program funding is shared with Elmira service area. State Resources subtotal reflects 50% of the full Southern Tier allocation, with the remainder in Table 3b.

2. Reinvestment funding \$50,921 previously allocated for Transitional Housing Program in Tompkins county on Table 3b was reallocated to a new Crisis/Respite Program Expansion in Tompkins county on Table 3a by combining with \$140,000 unallocated Aid to Localities funding on Table 3a.

			Table 3	b: Elmira Ps	sychiatric Center				
		1 1			-	Investment Plan Progress			
				Reinvestment			New	Annualized	
	Target		Prior	Expansion			Individuals	Reinvestment	
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)	
HCBS Waiver	Children	Seneca	6	3		6/5/2014	9	\$78,879	
HCBS Waiver	Children	Steuben	12	3		6/5/2014	11	\$78,879	
HCBS Waiver	Children	Wayne	12	6		6/5/2014	8	\$157,758	
SUBTOTAL:			36	12			28	\$315,516	
Supported Housing	۸ مار راد	A II	25	2		11/1/2014	3	\$46.0E2	
Supported Housing	Adult Adult	Allegany	35 0	1		2/1/2015	1	\$16,852 \$8,426	
Supported Housing Supported Housing		Cattaraugus		31		9/1/2014	39	\$262,253	
	Adult	Chemung	121				39 17		
Supported Housing	Adult	Ontario	64	13		10/1/2014		\$110,762	
Supported Housing	Adult	Schuyler	6	6		12/1/2015	3	\$50,841	
Supported Housing	Adult	Seneca	28	9		8/1/2014	14	\$76,197	
Supported Housing	Adult	Steuben	119	8		9/1/2014	9	\$67,408	
Supported Housing	Adult	Tompkins	64	4		9/1/2014	8	\$33,704	
Supported Housing	Adult	Wayne	70	4		10/1/2014	6	\$33,704	
Supported Housing	Adult	Yates	10	4		6/1/2015	6	\$33,875	
SUBTOTAL:			517	82			106	\$694,022	
State Resources:			N/A						
Mobile Integration Team ¹	Adults &	Southern Tier	14//	38.35 FTEs					
Mobile Integration Team	Children	Service Area		30.331123		6/1/2014	3,371	\$1,342,250	
Olinia Francia al	Adult	Southern Tier		7.2 FTEs		0/1/2014	0,071	Ψ1,042,200	
Clinic Expansion ¹	Addit	Service Area		7.21123		1/1/2015	351	\$252,000	
Crisis/respite Unit	Children	Elmira PC		12.5 FTEs		1/1/2010	551	Ψ202,000	
Onsis/respite onit	Official	Service Area		12.511123		4/16/2015	325	\$875,000	
Clinic Expansion	Children	Elmira PC		1.5 FTEs		4/10/2010	N/A	ψ070,000	
Cirilo Expandion	Official	Service Area		1.01123		9/1/2014	14// (\$105,000	
SUBTOTAL:		COIVICO 7 II CO				0/1/2011	4,047	\$2,574,250	
332101112							.,	\$2,0: 1,200	
Aid to Localities:		Western	N/A	N/A					
		Southern Tier/							
		Finger Lakes							
		Service Area							
Respite Services	Adult	Western				3/1/2016	76	\$50,368	
Community Support Services	Adult	Southern Tier/				5/1/2016	530	\$61,947	
Family Support	Adult	Finger Lakes				3/7/2017	6	\$34,887	
Peer Training	Adult	Service Area				12/5/2015	281	\$10,538	
Transitional Housing Program	Adult	Steuben				7/1/2015	46	\$101,842	
Transitional Housing Program	Adult	Yates				4/8/2016	27	\$50,921	
Mobile Psychiatric Supports	Adult	Wayne			Funding has been made available on the			400,02	
		,			county State Aid Letter, and is effective				
					January 1, 2017.			\$40,576	
Community Support Program	Adult	Chemung			, , , , , , , , , , , , , , , , , , , ,			, .,.	
Expansion - Long Stay Team						7/1/2017	58	\$108,000	
Home-Based Crisis Intervention	Children	Chemung			Funding has been made available on the				
Program Expansion					county State Aid Letter, and is effective				
					October 1, 2017.			\$244,495	
SUBTOTAL:					, -		1024	\$703,574	
		•			•				
					State Resources - Ir	Development:		\$53,786	

State Resources - In Development:		\$53,786
Aid to Localities - In Development:		\$30,793
TOTAL:	5 205	\$4 371 941

^{1.} State Resources program funding is shared with Binghamton service area. State resources subtotal reflects 50% of the full Southern Tier allocation, with the remainder in Table 3a.

*Note: Reinvestment funding \$50,921 previously allocated for Transitional Housing Program in Tompkins county on Table 3b was reallocated to a new Crisis/Respite Program Expansion in Tompkins county on Table 3a by combining with \$140,000 unallocated Aid to Localities funding on Table 3a.

			Table	3c: St. Lawrence	e Psychiatric Center				
					Investme	ent Plan Progress	lan Progress		
Service	Target Population	County	Prior Capacity	Reinvestment Expansion (units)	Status Update	Start Up Date	New Individuals Served	Annualized Reinvestment Amount (\$)	
HCBS Waiver	Children	Essex	12	6		6/5/2014	14	\$157,758	
HCBS Waiver	Children	St. Lawrence	18	6		5/1/2014	24	\$157,758	
SUBTOTAL:			30	12			38	\$315,516	
Supported Housing	Adult	Clinton	54	8		10/1/2014	14	\$61,949	
Supported Housing	Adult	Essex	29	6		3/1/2015	8	\$46,818	
Supported Housing	Adult	Franklin	42	5		1/1/2015	10	\$38,375	
Supported Housing	Adult	Jefferson	57	9		11/1/2014	13	\$69,075	
Supported Housing	Adult	Lewis	51	2		2/1/2015	5	\$15,350	
Supported Housing	Adult	St. Lawrence	73	25		1/1/2015	42	\$191,875	
SUBTOTAL:	7.00.1	ou zawionio	306	55			92	\$423,442	
State Resources:			N/A						
Mobile Integration Team	Adults & Children	St. Lawrence PC Service Area	14//	21 FTEs		6/6/2014	1,777	\$1,470,000	
Clinic expansion	Children	Jefferson		6.5 FTEs		9/8/2015	155	\$455.000	
Crisis/respite Unit ¹	Children	St. Lawrence PC Service Area		11.5 FTEs		10/1/2016		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SUBTOTAL:		Area				10/1/2016	116 2.048	\$811,160 \$2,736,160	
GGB 10 IALL							2,040	4 2,: 6 6,: 6 6	
Aid to Localities:		St. Lawrence PC Service Area	N/A	N/A					
Outreach Services Program	Adult	Clinton				2/1/2015	89	\$46,833	
Mobile Crisis Program	Adult	Essex				4/28/2015	184	\$23,417	
Community Support Program	Children	Essex				3/1/2015	246	\$23,416	
Mobile Crisis Program	Adults & Children	St. Lawrence				7/1/2015	468	\$46,833	
Support Services Program	Adult	Franklin				3/15/2015	47	\$12,278	
Self Help Program	Adult	Franklin				3/15/2015	115	\$12,277	
Outreach Services Program	Adults &	Franklin							
Crisis Intervention Program	Children Adults & Children	Franklin				3/15/2015 6/1/2015	820 60	\$12,278 \$10,000	
Outreach Services Program	Adults & Children	Lewis				1/4/2016	238	\$46,833	
Outreach Services Program	Adult	Jefferson				9/28/2015	917	\$46,833	
Non-Medicaid Care Coordination	Children	Jefferson				9/1/2017	20	\$200,000	
Child & Family Support Team	Children	St. Lawrence				2/12/2018	8	\$200,000	
SUBTOTAL:				İ			3,212	\$680,998	

State & Local Reources - In	Development ² :		\$70,000
	TOTAL:	5,390	\$4,226,116

^{1.} Utilization for this program has been updated after a review of data issues.
2. Unutilized State resources funding \$70,000 (1FTE), which was previously allocated for Day Treatment program in St. Lawrence PC Service Area, has been reprogrammed for future planning.

		Tab	e 3d: Sag	amore Child	ren's Psychiatric Center				
					Investment Plan Progress				
2	Target		Prior	Reinvestment Expansion		Otari Ha Data	New Individuals	Annualized Reinvestmen	
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)	
HCBS Waiver	Children	Nassau	90	24		10/1/2013	89	\$661,440	
HCBS Waiver	Children	Suffolk	102	30		5/6/2014	81	\$826,800	
SUBTOTAL:			192	54			170	\$1,488,240	
State Resources:			N/A						
Family Court Evaluation	Children	Long Island		1 FTE		4/1/2014	N/A	\$70,000	
Mobile Crisis	Children	Suffolk		1 FTE		7/1/2014	1,000	\$70,000	
Mobile Integration Team	Children	Nassau & Suffolk		10 FTEs		11/30/2014	190	\$700,000	
Clinic Expansion ¹	Children	Nassau & Suffolk		5 FTEs		3/21/2016	71	\$350,000	
Crisis/respite Unit	Children	Nassau & Suffolk		9 FTEs		3/9/2015	312	\$630.000	
SUBTOTAL:						0,0,00	1,573	\$1,820,000	
Aid to Localities:		Long Island	N/A	N/A					
6 Non-Medicaid Care Coordinators	Children	Suffolk				4/1/2016	102	\$526,572	
1.5 Intensive Case Managers	Children	Suffolk			State Aid:		12	\$30,954	
					State Share of Medicaid*	4/1/2016		\$50,345	
Non-Medicaid Case Management	Children	Nassau			Funding has been made available on the county State Aid			\$85,000	
Mobile Crisis Team	Adults & Children	Nassau			Letter, and is effective July 1, 2017.			\$225,700	
SUBTOTAL:							114	\$918,571	

Aid to Localities - In	Development:		\$280,000
	TOTAL:	1,857	\$4,506,811

Notes:

1. A portion of previously allocated and unused clinic FTEs have been reprogrammed for future planning.



^{*} Gross Medicaid projected \$100,690

			Table	e 3e: Pilgrim	Psychiatric Center			
						estment Plan Pr	ogress	
Service	Target Population	County	Prior Capacity	Reinvestment Expansion (units)	Status Update	Start Up Date	New Individuals Served	Annualized Reinvestment Amount (\$)
Supported Housing	Adult	Nassau	885	83	Otatao opaato	3/1/2015	73	\$1,101,564
Supported Housing	Adult	Suffolk	1,360	125		12/1/2014	126	\$1,660,408
SUBTOTAL:	710011	- Current	2,245	208		, ,,	199	\$2,761,972
State Resources:			N/A					
Clinic Expansion	Adult	Nassau & Suffolk		5 FTEs		11/20/2015	44	\$350,000
Mobile Integration Team	Adult	Nassau & Suffolk		20 FTEs		1/11/2016	852	\$1,400,000
SUBTOTAL:							896	\$1,750,000
Aid to Localities:		Long Island	N/A	N/A				
2 Assertive Community Treatment teams (48 slot teams in Nassau and	Adult	Nassau		136	State Aid			\$241,112
expansion of an existing 48 team to a 68 slot team in							170	
Suffolk)*					State Share of Medicaid*	3/1/2015		\$917,187
Three (3) Mobile Crisis Teams	Adults & Children	Nassau & Suffolk				8/1/2015	3,647	\$758,740
Hospital Alternative Respite Program	Adult	Suffolk				7/6/2016	49	\$532,590
Recovery Center	Adult	Suffolk				4/15/2016	500	\$250,000
Mobile Crisis Team Expansion - Long Stay Team ¹	Adults & Children	Nassau & Suffolk				7/1/2016	See Table 3n ¹	\$272,948
Mobile Residential Support Team Expansion - Long Stay	Adult	Suffolk						
Team	Adult	Nanan				7/1/2016	342	\$275,186
Crisis Program Expansion - Long Stay Team	Adult	Nassau			Funding has been made available on the county State Aid Letter, and is effective July 1, 2016.			\$230,864
Crisis Stabilization Center	Adult	Suffolk	+		Funding has been made available			\$804,440
Mobile Crisis Team ²	Adults & Children	Nassau			on the county State Aid Letter, and is effective July 1, 2017.			\$225,700
Client Financial Management Services ²	Adult	Nassau			·			\$85,000
SUBTOTAL:							4,708	\$4,593,767

Supported Housing - I	n Development		\$499,830
State & Local Resources- In D	evelopment ^{2, 3:}		\$144,160
Г	TOTAL:	5,803	\$9,749,729

^{*} Gross Medicaid projected \$1,827,048; State Share adjusted to reflect current model

- 1. The Mobile Crisis Team expansion in Suffolk County is funded by Long Island Art. 28 reinvestment funding and Pilgrim PC Aid to Localities funding. The number of newly served individuals is only reflected on Table 3n, so as not to duplicate the number of individuals served.
- 2. Previously undeveloped State FTE resources converted to support new local Mobile Crisis and Client Financial Management programming. Additional unallocated resources shifted to Table 3h.
- 3. State Resources funding In Development \$70,000 previously allocated to NYC PC on Table 3h was reallocated to Pilgrim PC on Table 3e by combining with \$74,160 Aid to Localities funding- In Development on Table 3e.



					Buffalo Psychiatric Center Investment Plan Progress			
O a mina	Target	Onumber	Prior	Reinvestment Expansion			New Individuals	Annualized Reinvestment
Service HCBS Waiver	Population Children	County	Capacity 0	(units)	Status Update	Start Up Date 6/5/2014	Served 18	Amount (\$) \$157,758
HCBS Waiver	Children	Allegany	12	6		11/1/2013	19	\$157,758
HCBS Waiver		Cattaraugus	6	6		6/5/2014	26	
HCBS Waiver	Children Children	Chautauqua	78	6		4/1/2014	28	\$157,758 \$157,758
SUBTOTAL:	Children	Erie	96	24		4/1/2014	91	\$631,032
SUBTUTAL:			90	24			91	\$631,032
Supported Housing	Adult	Cattaraugus	104	12		7/1/2014	17	\$101,607
Supported Housing	Adult	Chautaugua	86	12		8/1/2014	16	\$101,664
Supported Housing	Adult	Erie	863	66		8/1/2014	94	\$557,826
Supported Housing	Adult	Niagara	143	22		9/1/2014	38	\$186,227
SUBTOTAL:			1,196	112			165	\$947,324
State Resources:			N/A					
Mobile Integration Team	Children	Western NY CPC Service Area		10 FTEs		12/19/2014	689	\$700,000
Clinic Expansion	Children	Western NY CPC Service Area		4 FTEs		2/5/2015	131	\$280,000
Mobile Mental Health Juvenile	Children	Western NY		1 FTE		2/3/2013	131	\$200,000
Justice Team		CPC Service Area				12/1/2015	40	\$70,000
Mobile Integration Team	Adult	Buffalo PC Service Area		7 FTEs		1/12/2016	227	\$490,000
SUBTOTAL:							1,087	\$1,540,000
Aid to Localities:								
Peer Crisis Respite Center (including Warm Line)	Adult	Chautauqua and Cattaraugus				11/18/2015	163	\$315,000
Mobile Transitional Support Teams (2)	Adult	Chautauqua and Cattaraugus				1/1/2015	494	\$234,000
Peer Crisis Respite Center (including Warm Line)	Adult	Erie				1/26/2015	590	\$353,424
Mobile Transitional Support Teams (3)	Adult	Erie				1/26/2015	447	\$431,000
Crisis Intervention Team	Adults & Children	Erie				1/1/2015	799	\$191,318
Peer Crisis Respite Center (including Warm Line)	Adult	Niagara				12/1/2014	702	\$256,258
Mobile Transitional Support Team	Adult	Niagara				1/20/2015	193	\$117,000
Community Integration Team - Long Stay Team	Adult	Erie				10/27/2016	59	\$350,000
Diversion Program	Adult	Erie				1/12/2018	10	\$424,712
SUBTOTAL:							3,457	\$2,672,712

TOTAL:	4,800	\$5,791,068



			i abie 3g.	Rochester Psy					
				1 <u>.</u>	Investment Plan Progress				
				Reinvestment				Annualized	
	Target		Prior	Expansion	0		New Individuals	Reinvestment	
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)	
Supported Housing	Adult	Genesee	45	2		1/1/2016	4	\$16,852	
Supported Housing	Adult	Livingston	38	2		2/1/2015	4	\$16,852	
Supported Housing	Adult	Monroe	427	103		10/1/2014	164	\$868,049	
Supported Housing	Adult	Orleans	25	6		7/1/2015	4	\$51,666	
Supported Housing	Adult	Wayne	0	6		12/1/2014	4	\$51,666	
Supported Housing	Adult	Wyoming	20	6		11/1/2014	6	\$50,862	
SUBTOTAL:			555	125			186	\$1,055,947	
State Resources:			N/A						
Mobile Integration Team	Adult	Rochester PC		24 FTEs					
		Service Area				10/30/2014	631	\$1,680,000	
OnTrackNY Expansion	Adult	Rochester PC		2 FTEs					
		Service Area				3/21/2016	35	\$185,440	
Clinic Expansion	Adult	Rochester PC		4 FTEs					
		Service Area				1/1/2015	97	\$280,000	
SUBTOTAL:							763	\$2,145,440	
Aid to Localities:		Rochester PC	N/A	N/A					
		Service Area							
Peer Bridger Program	Adult	Genesee &							
		Orleans				6/4/2015	19	\$30,468	
Community Support Team	Adult	Rochester PC							
		Service Area				3/1/2015	139	\$500,758	
Peer Bridger Program	Adult	Livingston							
		Monroe							
		Wayne							
		Wyoming				2/1/2015	139	\$262,032	
Crisis Transitional Housing	Adult	Livingston				2/15/2015	33	\$112,500	
Crisis Transitional Housing	Adult	Orleans				7/30/2015	31	\$112,500	
Crisis Transitional Housing	Adult	Wayne				4/8/2015	47	\$112,500	
Crisis Transitional Housing	Adult	Wyoming				2/28/2015	42	\$112,500	
Peer Run Respite Diversion	Adult	Monroe				5/7/2015	712	\$500,000	
Assertive Community	Adult	Monroe		48	State Aid		62	\$79,624	
Treatment Team					State Share of Medicaid*	7/1/2015	1	\$310,764	
Assertive Community	Adult	Monroe		48	State Aid			\$79,624	
Treatment Team							85	. ,-	
				<u> </u>	State Share of Medicaid*			\$310,764	
Peer Support ¹	Adult	Monroe				1/15/2016		\$30,006	
Enhanced Recovery Supports	Adult	Wyoming				9/1/2014	247	\$51,836	
Recovery Center	Adult	Genesee &		 		0/1/2017	2.7	ψο 1,000	
,		Orleans				5/7/2015	85	\$217,124	
Community Support Team -	Adult	Monroe						, ,	
Long Stay Team	, tout					5/1/2016	53	\$350,000	
SUBTOTAL:						5, ., 25 . 5	1,694	\$3,173,000	

TOTAL: 2,643 \$6,374,387	7
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1. Peer support is an enhancement of the ACT model, and individuals served by the ACT Team also receive peer support.



^{*}Gross Medicaid projected \$621,528 per ACT Team (\$1,243,056)

		Ta	ble 3h: Ne	ew York City	Psychiatric Centers				
						Investment Plan Progress			
				Reinvestment				Annualized	
	Target		Prior	Expansion			New Individuals	Reinvestment	
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)	
HCBS Waiver	Children	Bronx	144	33		10/1/2013	57	\$916,566	
HCBS Waiver	Children	Kings	180	12		1/1/2014	53	\$332,745	
HCBS Waiver	Children	New York	132	6		6/1/2015	15	\$167,385	
HCBS Waiver	Children	Queens	108	12		10/1/2013	20	\$332,745	
SUBTOTAL:			564	63			145	\$1,749,440	
Supported Housing	Adult	Bronx	2,120	70		5/1/2015	52	\$752,150	
Supported Housing	Adult	Kings	2,698	60		7/1/2016	24	\$637,460	
Supported Housing	Adult	New York	1,579	104		3/1/2015	134	\$1,564,472	
Supported Housing	Adult	Queens	1,887	70		12/1/2016	30	\$879,320	
Supported Housing	Adult	Richmond	492	60		4/1/2016	32	\$718,080	
SUBTOTAL:			8,776	364			272	\$4,551,482	
State Resources:			N/A						
Mobile Integration Team	Adult	Queens		7 FTEs		3/21/2016	157	\$490,000	
Mobile Integration Team	Adult	New York		7 FTEs		12/23/2016	170	\$490,000	
Mobile Integration Team	Children	Bronx Kings		7 FTEs					
		Queens				1/1/2017	216	\$490,000	
SUBTOTAL:							543	\$1,470,000	
Aid to Localities:									
Respite Capacity Expansion	Adult	NYC	N/A	N/A		7/1/2015	726	\$2,884,275	
Pathway Home Program	Adult	NYC				4/1/2016	500	\$3,546,663	
Crisis Pilot Program (3 Year)	Adult	NYC				9/1/2016	222	\$462,760	
Hospital Based Care Transition Team	Adult	NYC			Funding has been made available on direct contract,				
					effective April 1, 2017.			\$537,240	
SUBTOTAL:					,		1,448	\$7,430,938	

Supported Housing - In	\$1,166,270		
State Resources - In	Development ¹ :		\$1,120,000
	TOTAL:	2,408	\$17,488,130



^{1.} State Resources funding – In Development \$70,000 previously allocated to NYC PC on Table 3h was reallocated to Pilgrim PC on Table 3e by combining with \$74,160 Aid to Localities funding- In Development on Table 3e.

		Table 3i: Ro	ckland a	nd Capital Di	strict Psychiatric Centers			
						estment Plan Prog	gress	
				Reinvestment		•		Annualized
	Target		Prior	Expansion			New Individuals	Reinvestment
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)
HCBS Waiver	Children	Orange	21	6		11/1/2013	31	\$157,758
HCBS Waiver	Children	Rockland	24	6		6/5/2014	17	\$165,360
SUBTOTAL:			45	12			48	\$323,118
Supported Housing	A duilt	Dutobooo	229	20		12/1/2014	24	\$261,066
Supported Housing	Adult Adult	Dutchess Orange	262	36		10/1/2014	47	\$468,504
Supported Housing	Adult	Putnam	67	4		5/1/2015	5	\$54,156
Supported Housing	Adult	Rockland	173	19		7/1/2014	28	\$269,822
Supported Housing	Adult	Sullivan	61	10		11/1/2014	8	\$93,184
Supported Housing	Adult	Ulster	142	28		1/1/2015	35	\$275,880
Supported Housing	Adult	Westchester	907	28		4/1/2015	27	\$436,162
Supported Housing	Adult	Albany	276	11		3/1/2017	9	\$105,036
Supported Housing	Adult	Columbia	39	8		1/1/2017	8	\$76,377
Supported Housing	Adult	Greene	35	9		3/1/2015	See Table 3m ¹	\$85,907
Supported Housing	Adult	Rensselaer	125	10		6/1/2017	8	\$95,437
Supported Housing	Adult	Saratoga	50	6			3	\$57,317
Supported Housing	Adult	Schenectady	153	3		10/1/2015	See Table 3m ¹	\$28,590
Supported Housing	Adult	Schoharie	31	8		2/1/2017	6	\$76,377
Supported Housing	Adult	Warren &	54	8				
		Washington				11/1/2017	8	\$74,814
SUBTOTAL:			2,604	208			216	\$2,458,629
State December								
State Resources: Mobile Integration Team	Adult	Rockland PC		4 FTEs				
Mobile integration ream	Addit	Service Area		4 - 1 - 5		2/2/2017	31	\$280,000
Mobile Integration Team	Adult	Capital District		6 FTEs		2/2/2017	01	Ψ200,000
mozno mogranom roam	, taut	PC Service		020				
		Area				10/1/2016	49	\$420,000
SUBTOTAL:							80	\$700,000
Aid to Localities:		Rockland PC	N/A	N/A				
		Service Area						
Hospital Diversion/Crisis Respite	Adult	Dutchess				2/12/2015	185	\$200,000
Outreach Services	Adult	Orange				12/1/2014	23	\$36,924
Outreach Services	Children	Orange				10/1/2014	407	\$85,720
Advocacy/Support Services	Adult	Putnam				9/28/2015	33	\$23,000
Self-Help Program	Adult Adults &	Putnam Rockland				2/1/2015	45	\$215,000
Mobile Crisis Intervention Program ²	Children	Nockialiu				2/24/2015	1 400	\$440 cco
Hospital Diversion/ Transition	Adults &	Sullivan				3/31/2015	1,489	\$449,668
T	Children	Sullivali				11/24/2014	1,049	\$22E 000
Program ²	Adults &	Ulster				11/24/2014	1,049	\$225,000
Mobile Crisis Services ²	Children	Olstei				2/9/2015	2,726	\$400,000
Assertive Community Treatment	Adult	Ulster		20	State Aid:	2/0/2010		\$33,952
team expansion (48 to 68 slots)	, taut	G.o.o.		20	State Share of Medicaid:	12/1/2014	39	\$66,664
Outreach Services	Adult	Westchester				4/1/2015	84	\$267,328
Crisis Intervention/ Mobile Mental	Children	Westchester						
Health Team						11/1/2014	138	\$174,052
Family Engagement & Support	Adults &	Rockland						
Services Program	Children					1/1/2017	303	\$95,000
Outreach Team - Long Stay Team	Adult	Albany				9/6/2016	27	\$230,000
		Schenectady				9/9/2016	9	\$200,000
		Dutchess				12/12/2016	9	\$225,000
		Orange				9/14/2016	17	\$225,000
		Rockland		-		8/17/2016	16	\$225,000
Pagnita Canvinga Program	Children	Westchester				10/4/2016	10	\$225,000
Respite Services Program	Children	Dutchess		-		7/27/2017	20	\$275,000
Homo Rood Crisis Intervention	Children	Westchester		-		9/19/2017	14	\$189,048
Home Based Crisis Intervention Services	Children	Orange Rockland				9/18/2017 10/23/2017	15 13	\$100,000 \$160,000
OCI VICES		Sullivan				2/28/2018	3	\$100,000
								Ψ100,000
Family Support Services	Children	Ulster Westchester				10/2/2017 10/1/2017	14 21	\$81,976 \$149,784

Aid to Localities -In Development: \$1,074,192

TOTAL:

7,053

Notes:



\$9,214,055

^{*} Gross Medicaid projected \$229,156

^{1.} Greene and Schenectady Counties currently receive Stony-Lodge Rye Article 28 funding for supported housing, and utilization is reported on Table 3m. Additional supported housing units were awarded to these counties through Rockland PC Aid to Localities. All utilization will continue to be reported on the Table 3m to prevent duplication.

^{2.} Mobile Crisis programs in Rockland, Sullivan and Ulster Counties are funded by the Rockland PC Aid to Localities funding and Stony-Lodge Rye Article 28 funding. The number of newly served individuals is only reflected on the Rockland PC table so as not to duplicate the number of individuals served.

			Table 3i	i: Hutchinas l	Psychiatric Center			
			1 43.0 0		Investment Plan Progress			
	.		5.	Reinvestment	***			Annualized Reinvestment
O a mid a a	Target	0	Prior	Expansion	Ctatus I la data	Ctart I In Data	New Individuals Served	Amount (\$)
Service	Population	County	Capacity	(units)	Status Update	Start Up Date		(' '
HCBS Waiver HCBS Waiver	Children	Cayuga	12	6		7/1/2014 7/1/2014	16 16	\$157,758
	Children	Cortland	6	6				\$157,758
HCBS Waiver	Children	Onondaga	42	6		4/1/2014	23	\$157,758
SUBTOTAL:			60	18			55	\$473,274
Supported Housing	Adult	Cayuga	61	7		1/1/2016	9	\$54,154
Supported Housing	Adult	Cortland	53	4		1/1/2016	5	\$30,924
Supported Housing	Adult	Fulton	30	3		2/1/2017	1	\$23,230
Supported Housing	Adult	Hamilton	4	3		1/1/2017	2	\$23,193
Supported Housing	Adult	Herkimer	30	1		1/1/2017	8	\$7,731
Supported Housing	Adult	Madison	28	4		4/1/2017	4	\$30,961
Supported Housing	Adult	Montgomery	37	3		1/1/2017	3	\$23,230
Supported Housing	Adult	Oneida	232	8		2/17/2017	22	\$61,848
Supported Housing	Adult	Onondaga	300	4		10/1/2017	2	\$30,997
Supported Housing	Adult	Oswego	62	5		12/1/2015	15	\$38,692
SUBTOTAL:			837	42			71	\$324,960
State Resources:								
Crisis/respite unit	Children	Hutchings PC	N/A	12 FTEs				
	Crindren	Service Area	IN/A	1211125		11/5/2014	404	\$840,000
OnTrackNY Expansion	Adults &	Hutchings PC	N/A	3 FTEs				
	Children	Service Area				8/1/2015	41	\$228,400
SUBTOTAL:							445	\$1,068,400
Aid to Localities:		Hutchings PC Service Area	N/A	N/A				
Children's Respite Program	Children	Onondaga				4/1/2017		\$96,750
Clinical Services & Support	Children	Onondaga				4/1/2017	601	\$430,555
Respite/Clinical Oversight	Children	Onondaga				4/1/2017		\$99,695
Long Stay Reduction	Adult	Onondaga						
Transition Team						11/9/2016	10	\$300,000
Enhanced Outreach and	Adults &	Hamilton						\$37,500
Clinical Support Services	Children	Herkimer				11/17/2017	20	\$37,500
		Fulton						\$37,500
Enhanced Child & Family	Children	Montgomery				1/1/001=	207	407.500
Support Services						4/1/2017	237	\$37,500
SUBTOTAL:			l				868	\$1,077,000

TOTAL:	1,439	\$2,943,634



Article 28 and 31 Hospital Reinvestment Summaries

Pursuant to Chapter 53 of the Laws of 2014 for services and expenses of the medical assistance program to address community mental health service needs resulting from the reduction of psychiatric inpatient services.

Hospital	Target Population	County/Region	Annualized Reinvestment Amount
		Allegany, Livingston,	
St. James Mercy	Children and Adults	Steuben	\$894,275
Medina Memorial	Adults	Niagara, Orleans	\$199,030
Holliswood/Stony Lodge/Mt. Sinai	Children and Youth	New York City	\$10,254,129
Stony Lodge & Rye	Children and Adults	Hudson River	\$4,634,577
LBMC/NSUH/PK	Children and Adults	Nassau, Suffolk	\$2,910,400

Subtotal: \$18,892,411

		Table 3k	: Western	Region Article	28 Hospital Reinvestment			
					Investment Plan Progress			
Service	Target Population	County	Prior Capacity	Reinvestment Expansion (units)	Status Update	Start Up Date	New Individuals Served	Annualized Reinvestment Amount (\$)
Article 28:			N/A	(3)				(+)
St. Jame	es Mercy	•						
Intensive Intervention Services	Adult	Allegany				8/25/2014	105	\$95,000
Post Jail Transition Coordinator/Forensic Therapist	Adults & Children	Livingston				1/5/2015	1,155	\$59,275
Enhanced Mobile Crisis Outreach	Adults & Children	Steuben				11/3/2014	1,208	\$490,000
Intensive In-Home Crisis Intervention (Tri-County)	Adults & Children	Allegany, Livingston, Steuben				6/1/2015	109	\$250,000
SUBTOTAL:							2,577	\$894,275
Medina Memo	orial Hospita	ıl						
Mental Hygiene Practioner to handle crisis calls (late afternoon and evenings)	Adults & Children	Niagara				8/15/2014	176	\$68,030
Enhanced Crisis Response ¹	Children	Orleans				7/1/2014	733	\$131,000
SUBTOTAL:							909	\$199,030

101AL. 0,400 \$1,000,000	TOTAL: 3.486 \$1.093.30	<u></u>
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1. Utilization data for this program has been recalcuated after a review of data quality issues.

		Table 3I: Ne	w York Ci	ty Region Artic	le 28 Hospital Reinvestmen	t		
					Investme	ent Plan Pro	gress	
				Reinvestment			New	Annualized
	Target		Prior	Expansion		Start Up	Individuals	Reinvestment
Service	Population	County	Capacity	(units)		Date	Served	Amount (\$)
Holliswoo		, , , , , , , , , , , , , , , , , , , ,		(= ==)				(+)
HCBS Waiver	Children	Bronx	144	15	State Share of Medicaid:	2/1/2016	See Table 3h1	\$418,500
Crisis Beds	Children	NYC		5			0	\$210,000
Rapid Response Mobile	Children	NYC				1/1/2014	301	\$1,150,000
Family Advocates	Children	NYC				1/1/2014	709	\$450,000
4.5 Rapid Response Teams	Children	NYC				4/28/2015	308	\$1,989,569
Family Resource Center ²	Children	NYC				2/1/2016	500	\$1,335,777
High Fidelity Wrap Around	Children	NYC						\$181,865
SUBTOTAL:							1,818	\$5,735,711
Stony Lodg	ge Hospital						·	
Partial Hospitalization	Children	NYC						
Program & Day Treatment								
Program (Bellevue)					State Share of Medicaid:			\$386,250
Home Based Crisis	Children	NYC						
Intervention Team (Bellevue)						11/1/2015	34	\$300,000
Family Resource Center ²	Children	NYC				2/1/2016	See Note ²	\$728,622
High Fidelity Wraparound	Children	NYC						\$185,128
SUBTOTAL:							34	\$1,600,000
Mount Sina								
Mt. Sinai Partial	Adult	NYC						
Hospitalization (15 slots)				15	State Share of Medicaid:			\$303,966
4 Assertive Community	Adult	NYC						
Treatment Teams (68 slots								
each)				272	State Share of Medicaid:			\$1,855,694
1 Assertive Community	Adult	NYC						#
Treatment Team (48 slots)		111/0		48	State Share of Medicaid:		0.5	\$384,666
Expanded Respite Capacity	Adult	NYC					293	\$374,093
SUBTOTAL:								\$2,918,418



\$10,254,129

1,852

TOTAL:

^{1.} Waiver slots in Bronx County are funded by the NYC Aid to Localities reinvestment funding and Stony Lodge Article 28 funding. All waiver utilization is reported on the Table 3h - New York City to prevent duplication in the number of people served.

^{2.} The Family Resource Center is funded by the Holliswood Art. 28 reinvestment funding and Stony Lodge Art. 28 reinvestment funding. The number of newly served individuals is only reflected in the Holliswood Reinvestment so as not to duplicate the number of individuals served.

		Table 3m: H	ludson Ri	ver Region Artic	le 28 Hospital Reinvestmen	nt		
					-	ent Plan Pro	gress	
				Reinvestment			New	Annualized
	Target		Prior	Expansion		Start Up	Individuals	Reinvestment
Service	Population	County	Capacity	(units)	Status Update	Date	Served	Amount (\$)
Article 28:			N/A	i i	·			,
Stony Lodge	/Rye Hospita	ıİ						
HCBS Waiver Slots	Children	Albany		6	State Share of Medicaid:	12/1/2015	18	\$157,704
		Saratoga		3	State Share of Medicaid:	1/1/2015	21	\$78,803
		Warren		3	State Share of Medicaid:	1/1/2015	12	\$78,803
		Westchester		6	State Share of Medicaid:	1/1/2015	19	\$157,704
SUBTOTAL:							70	\$473,014
Article 28:			N/A					
Supported Housing	Adult	Albany		2		9/1/2015	6	\$18,570
		Greene		5		3/1/2015	15	\$46,425
I		Rensselaer		7		5/1/2015	12	\$64,995
		Schenectady		7		10/1/2015	16	\$64,995
Mobile Crisis Services	Adult	Columbia				7/1/2015	1,364	\$180,636
		Greene				7/1/2015	1,295	\$203,859
		Sullivan				11/24/2014	See Table 3i ¹	\$81,447
Hospital Diversion Respite	Adult	Columbia				11/1/2015	18	\$43,560
		Greene				3/1/2015	4	\$20,337
Respite Services	Children	Columbia				3/30/2015	16	\$15,750
		Greene				3/30/2015	26	\$65,670
		Orange				6/30/2015	18	\$30,000
		Sullivan				4/1/2015	24	\$25,000
Respite Services	Adult	Dutchess				3/1/2015	188	\$25,000
		Orange				3/20/2015	33	\$60,000
		Putnam				6/1/2015	11	\$25,000
0 1111 1 10		Westchester				6/1/2015	39	\$136,460
Self Help Program	Adult	Dutchess				2/12/2015	389	\$60,000
		Orange				6/17/2015	50	\$30,000
Family Comment Complete	Obildee	Westchester				4/8/2015	125	\$388,577
Family Support Services	Children	Orange				2/18/2015	143	\$30,000
Adult Mobile Crisis Team (5	A al. 14	Schoharie Rensselaer				2/23/2015	356	\$170,000
Counties: Rensselaer, Saratoga, Schenectady,	Adult	Rensselaei						
Warren-Washington)	Children	Danastra				10/1/2015	358	\$1,000,190
Capital Region Respite Services (3 Counties: Albany, Rensselaer, Schenectady)	Children	Rensselaer						
		1				7/8/2015	45	\$30,000
Mobile Crisis Intervention	Adult	Rockland				3/30/2015	See Table 3i ¹	\$400,000
		Ulster				2/9/2015	See Table 3i ¹	\$300,000
Mobile Crisis Team (Tri- County: Saratoga, Warren- Washington)	Children	Warren				1/1/2016	268	\$545,092
Home Based Crisis	Children	Warren				1/1/2010	200	ψ040,002
Intervention (Tri-County: Saratoga, Warren-	Official	· · · · · · · · · · · · · · · · · · ·						
Washington)						11/26/2013	275	\$100,000
SUBTOTAL:							5,094	\$4,161,563

TOTAL:	5 164	\$4.634.577

^{1.} Mobile Crisis programs in Rockland, Sullivan and Ulster Counties are funded by the Rockland PC Aid to Localities funding and Stony Lodge-Rye Article 28 funding. The number of newly served individuals is only reflected on the Rockland PC table so as not to duplicate the number of individuals served.

		Table 3n: I	ong Islan	d Region Article	28 Hospital Reinvestment							
							ent Plan Progress					
				Reinvestment			New	Annualized				
	Target		Prior	Expansion		Start Up	Individuals	Reinvestment				
Service	Population	County	Capacity	(units)	Status Update	Date	Served	Amount (\$)				
Article 28:			N/A									
Long Beach Medical Center	/North Shore	University Hos	pital/Partial	Hospitalization								
Prog	ram Operated	by Pederson-l	Krag									
HCBS Waiver Slots	Children	Suffolk		6	State Share of Medicaid:		31	\$165,400				
SUBTOTAL:							31	\$165,400				
Article 28:												
(6) Mobile Residential	Adult	Nassau										
Support Teams						7/1/2015	348	\$1,344,000				
Mobile Crisis Team	Adults &	Nassau &										
Expansion ¹	Children	Suffolk				8/1/2015	2,769	\$212,000				
Satellite Clinic Treatment	Adult	Nassau					20	\$155,000				
Services					State Share of Medicaid:	8/1/2016		\$45,000				
(5) OnSite Rehabilitation	Adult	Nassau				2/1/2016	83	\$200,000				
	Adult	Nassau										
Residential Support Teams								\$200,000				
Help/Hot Line Expansion	Adult	Nassau						\$50,000				
On-Site MH Clinic	Children	Nassau						\$50,000				
(3) Clinic Treatment	Adult	Nassau										
Services						8/18/2016	93	\$375,000				
Family Advocate	Children	Nassau				9/1/2017	209	\$84,000				
Peer Outreach	Adult	Suffolk						\$30,000				
SUBTOTAL:							3,522	\$2,745,000				

TOTAL: 3,553 \$2,910,400

Notes:

1. The Mobile Crisis Team expansion in Suffolk County is funded by Long Island Art. 28 reinvestment funding and Pilgrim PC Aid to Localities funding. The number of newly served individuals is only reflected on the Long Island Art. RIV table (Table 3n) so as not to duplicate the number of individuals served.

^{*}Gross Medicaid projected \$420,800

Table 4: NYS OMH State Psychiatric Center Inpatient Discharge Metrics

Table 4. NT3 OMFI State Ps	Metrics Post Discharge								
State Inpatient Facilities ¹	Readmission ²	ER Utilization ³							
	For discharge cohort (Jul, 2017-Sep, 2017), % Having Psychiatric Readmission within 30 days	For discharge cohort (Jul, 2017-Sep, 2017), % Utilizing Psychiatric Emergency Room within 30 days							
Adult									
Bronx	25.8%	10.5%*							
Buffalo	17.9%	20.0%*							
Capital District	18.2%*	18.2%*							
Creedmoor	6.5%	6.5%							
Elmira	10.0%	0.0%*							
Greater Binghamton	9.1%	0.0%*							
Hutchings	7.4%	6.7%*							
Kingsboro	0.0%*	0.0%*							
Manhattan	30.2%	8.0%							
Pilgrim	10.0%	13.6%							
Rochester	5.3%*	40.0%*							
Rockland	16.7%	0.0%							
South Beach	14.3%	7.0%							
St. Lawrence	29.4%*	0.0%*							
Washington Heights	4.2%	19.0%							
Total	14.3%	9.4%							
Children & Youth									
Elmira	10.0%	10.3%							
Greater Binghamton	3.4%	15.4%							
Hutchings	9.1%	10.7%							
Mohawk Valley	11.4%	12.8%							
NYC Children's Center	6.7%	4.1%							
Rockland CPC	28.6%	23.1%							
Sagamore CPC	13.0%	13.3%*							
South Beach	0.0%*	0.0%*							
St. Lawrence	9.1%	10.0%							
Western NY CPC	0.0%	4.5%							
Total	9.8%	11.0%							
Forensic									
Central New York	8.5%	0.0%*							
Kirby	3.2%	3.2%							
Mid-Hudson	7.1%	2.4%							
Rochester	33.3%*	0.0%*							
Total	7.4%	2.2%							

Updated as of May 16, 2018

- 1. Research units and Sexual Offender Treatment Programs (SOTP) were excluded.
- 2. Readmissions were defined as State PC and Medicaid (Article 28 /31) psychiatric inpatient readmission events occurring within 1 to 30 days after the State PC discharge. The first readmission within the 30 days window was counted. The denominator for this measure was based on State inpatient discharges to the community. The discharge cohort has a 6-month lag to allow time for completion of Medicaid claim submissions. The discharges that were no longer qualified for Medicaid services (lost Medicaid eligibility, had Medicare or third party insurance) were excluded from the discharge cohort but who had a state operated service in the 3 months post discharge were retained in the discharge cohort.
- 3. ER utilization was identified using Medicaid claims and encounters only. The numerator included the first Psychiatric ER/CPEP event that occurred within thirty days post discharge. The denominator for this measure was based on State inpatient discharges to the community. The discharge cohort has a 6-month lag to allow time for completion of Medicaid claim submissions. The discharges that were no longer qualified for Medicaid services (lost Medicaid eligibility, had Medicare or third party insurance) were excluded from the discharge cohort.

^{*}Note this rate may not be stable due to small denominator (less than 20 discharges in the denominator).



Table 5: General and Private Hospital 30-Day Inpatient Readmission and ER Utilization Rates 1

							Metrics Post Discharge ⁴						
								Readmiss	_		ER Utilizat	ion ⁷	
				Сара	city (as of 0	4/1/18)	2017	arge cohort), % Having F mission with	Psychiatric	For discharge cohort (Jul, 2017-Sep, 2017), % Utilizing Psychiatric Emergency Room within 30 days			
Region	County ²	Hospital Name ³	Auspice	Total	Adults	Child	Total	Adult ⁶	Child	Total	Adult	Child	
Central	Broome	United Health Services Hospitals, Inc.	Article 28	56	56	0	12.1%	12.1%		12.5%	12.5%		
Central	Cayuga	Auburn Community Hospital	Article 28	14	14	0	13.5%	13.5%		9.6%	9.6%		
Central	Clinton	Champlain Valley Physicians Hospital Med Ctr.8	Article 28	30	18	12	6.5%	8.3%	0.0% *	3.2%	4.2%	0.0% *	
Central	Cortland	Cortland Regional Medical Center, Inc.	Article 28	11	11	0	15.2%	15.2%		18.2%	18.2%		
Central	Franklin	Adirondack Medical Center	Article 28	12	12	0	0.0% *	0.0% *	•	0.0% *	0.0% *		
Central	Jefferson	Samaritan Medical Center	Article 28	32	32	0	7.0%	7.0%		2.3%	2.3%		
Central	Montgomery	St. Mary's Healthcare	Article 28	20	20	0	14.0%	14.0%		14.0%	14.0%		
Central	Oneida	Faxton - St. Luke's Healthcare	Article 28	26	26	0	19.5%	19.5%		17.3%	17.3%		
Central	Oneida	Rome Memorial Hospital, Inc.	Article 28	12	12	0	0.0% *	0.0% *		0.0% *	0.0% *		
Central	Oneida	St. Elizabeth Medical Center	Article 28	24	24	0	21.8%	21.8%		18.5%	18.5%		
Central	Onondaga	St. Joseph's Hospital Health Center	Article 28	30	30	0	11.6%	11.6%	•	19.8%	19.8%		
Central	Onondaga	SUNY Health Science Center-University Hospital	Article 28	49	49	0	24.6%	24.6%		17.8%	17.8%		
Central	Oswego	Oswego Hospital, Inc.	Article 28	28	28	0	19.8%	19.8%	•	14.8%	14.8%		
Central	Otsego	Bassett Healthcare	Article 28	20	20	0	9.5%	9.5%	·	9.5%	9.5%		
Central	Saint Lawrence	Claxton-Hepburn Medical Center	Article 28	28	28	0	13.3%	13.3%		4.8%	4.8%		
Hudson	Albany	Albany Medical Center	Article 28	26	26	0	24.0%	24.0%		9.7%	9.7%		
Hudson	Columbia	Columbia Memorial Hospital	Article 28	22	22	0	8.3%	8.3%		6.3%	6.3%		
Hudson	Dutchess	Westchester Medical /Mid-Hudson Division	Article 28	40	40	0	20.8%	20.8%		17.8%	17.8%		
Hudson	Orange	Bon Secours Community Hospital	Article 28	24	24	0	24.7%	24.7%		27.3%	27.3%		
Hudson	Orange	Orange Regional Medical Center - Arden Hill Hospital	Article 28	30	30	0	16.5%	16.5%		13.7%	13.7%		
Hudson	Putnam	Putnam Hospital Center	Article 28	20	20	0	25.4%	25.4%		19.4%	19.4%		
Hudson	Rensselaer	Northeast Health - Samaritan Hospital	Article 28	63	63	0	23.1%	23.1%		13.3%	13.3%		
Hudson	Rockland	Nyack Hospital	Article 28	26	26	0	15.6%	15.6%		10.9%	10.9%		
Hudson	Saratoga	FW of Saratoga, Inc.	Article 31	88	31	57	10.7%	10.0%	11.0%	7.6%	7.1%	7.7%	
Hudson	Saratoga	The Saratoga Hospital	Article 28	16	16	0	17.5%	17.5%		17.5%	17.5%		
Hudson	Schenectady	Ellis Hospital	Article 28	52	36	16	14.3%	12.2%	19.5%	15.1%	16.0%	13.0%	
Hudson	Sullivan	Catskill Regional Medical Center	Article 28	18	18	0	3.8%	3.8%		15.4%	15.4%		
Hudson	Ulster	Health Alliance Hospital Mary's Ave Campus	Article 28	40	40	0	16.8%	16.8%		20.4%	20.4%		
Hudson	Warren	Glens Falls Hospital	Article 28	30	30	0	9.3%	9.3%		9.3%	9.3%		
Hudson	Westchester	Four Winds, Inc.	Article 31	178	28	150	11.4%	11.7%	11.4%	11.4%	8.3%	11.9%	
Hudson	Westchester	Montefiore Mount Vernon Hospital, Inc.	Article 28	22	22	0	13.8%	13.8%		15.5%	15.5%		
Hudson	Westchester	New York Presbyterian Hospital ⁹	Article 28	250	205	45	14.5%	15.5%	9.1% *	17.4%	19.0%	9.1% *	
Hudson	Westchester	Northern Westchester Hospital Center	Article 28	15	15	0	16.7% *	16.7% *		5.6% *	5.6% *	01.70	
Hudson	Westchester	Phelps Memorial Hospital Center	Article 28	22	22	0	25.8%	25.8%		19.4%	19.4%	·	
Hudson	Westchester	St Joseph's Medical Center	Article 28	149	136	13	19.5%	18.5%	27.5%	13.3%	13.4%	12.5%	
Hudson	Westchester	Westchester Medical Center	Article 28	101	66	35	17.1%	17.2%	0.0% *	9.8%	9.8%	0.0% *	
Long Island	Nassau	Mercy Medical Center	Article 28	39	39	0	24.6%	24.6%	0.070	15.9%	15.9%	0.076	
Long Island	Nassau	Nassau Health Care Corp/Nassau Univ Med Ctr	Article 28	128	106	22	14.4%	15.5%	5.0%	11.2%	10.1%	20.0%	
•		North Shore University Hospital @Syosset ¹⁰		20	20	0			5.0 /0		5.6% *	20.0 /0	
Long Island	Nassau		Article 28	36	20 36	0	11.1% *	11.1% *	•	5.6% *		•	
Long Island	Nassau	South Nassau Communities Hospital	Article 28	პხ	პხ	U	30.1%	30.1%		19.5%	19.5%		



Table 5: General and Private Hospital 30-Day Inpatient Readmission and ER Utilization Rates 1

									Metrics Post	Discharge	4	
				Cana	city (as of 0	<i>414 1</i> 4 9 \	2017	Readmiss arge cohort), % Having I mission witl	(Jul, 2017-Sep, Psychiatric	ER Utilization ⁷ For discharge cohort (Jul, 2017-Sep, 2017), % Utilizing Psychiatric Emergency Room within 30 days		
Region	County ²	Hospital Name ³	Auspice	Total	Adults	Child	Total	Adult ⁶	Child	Total	Adult	Child
Long Island	Suffolk	Brookhaven Memorial Hospital Medical Center	Article 28	20	20	0	21.3%	21.3%	0	14.9%	14.9%	•••••
Long Island	Suffolk	Brunswick Hospital Center, Inc. ¹¹	Article 31	124	87	37	18.2%	19.8%	14.1%	18.9%	18.8%	19.2%
Long Island	Suffolk	Eastern Long Island Hospital Association	Article 28	23	23	0	22.0%	22.0%		10.0%	10.0%	
Long Island	Suffolk	Huntington Hospital	Article 28	21	21	0	15.4%	15.4%	•	17.9%	17.9%	·
Long Island	Suffolk	John T. Mather Memorial Hospital	Article 28	37	27	10	31.5%	33.3%	21.4% *	22.8%	25.6%	7.1% *
Long Island	Suffolk	St. Catherine's of Siena Hospital	Article 28	42	42	0	26.3%	26.3%	21.4/0	17.5%	17.5%	7.170
•	Suffolk		Article 28	42	30	10	15.6%	26.3% 16.7%	11.1%	19.3%	21.3%	11.1%
Long Island	Suffolk	State University of NY at Stony Brook		206	30 141	65	16.1%	16.7%	15.9%	6.5%		6.3%
Long Island		The Long Island Home	Article 31								6.5%	
NYC	Bronx	Bronx-Lebanon Hospital Center ¹²	Article 28	104	79 55	25	19.8%	21.9%	9.0%	21.1%	21.7%	17.9%
NYC	Bronx	Montefiore Medical Center	Article 28	55	55	0	13.5%	13.5%	•	13.5%	13.5%	•
NYC	Bronx	NYC-HHC Jacobi Medical Center	Article 28	107	107	0	24.0%	24.0%	•	17.1%	17.1%	•
NYC	Bronx	NYC-HHC Lincoln Medical & Mental Health Ctr.	Article 28	60	60	0	18.3%	18.3%	•	16.3%	16.3%	
NYC	Bronx	NYC-HHC North Central Bronx Hospital	Article 28	70	70	0	14.6%	14.6%	•	17.1%	17.1%	•
NYC	Bronx	St. Barnabas Hospital	Article 28	49	49	0	18.3%	18.3%	•	18.8%	18.8%	•
NYC	Kings	Brookdale Hospital Medical Center	Article 28	61	52	9	14.4%	16.3%	5.0%	19.1%	18.4%	22.5%
NYC	Kings	Interfaith Medical Center, Inc.	Article 28	120	120	0	23.3%	23.3%		18.2%	18.2%	
NYC	Kings	Kingsbrook Jewish Medical Center	Article 28	58	58	0	28.4%	28.4%		25.4%	25.4%	
NYC	Kings	Maimonides Medical Center	Article 28	70	70	0	25.5%	25.5%		13.9%	13.9%	
NYC	Kings	NYC-HHC Coney Island Hospital	Article 28	64	64	0	19.2%	19.2%	•	18.5%	18.5%	
NYC	Kings	NYC-HHC Kings County Hospital Center	Article 28	205	160	45	18.7%	19.7%	12.1%	21.5%	20.5%	27.3%
NYC	Kings	NYC-HHC Woodhull Medical & Mental Health Ctr. 13	Article 28	112	112	0	25.2%	25.2%	•	20.9%	20.9%	·
NYC	Kings	New York Methodist Hospital	Article 28	50	50	0	17.4%	17.4%		11.0%	11.0%	
NYC	Kings	New York University Hospitals Center	Article 28	35	35	0	12.9%	12.9%		11.7%	11.7%	
NYC	New York	Beth Israel Medical Center	Article 28	92	92	0	22.4%	22.4%		15.7%	15.7%	
NYC	New York	Lenox Hill Hospital	Article 28	27	27	0	36.0%	36.0%		39.3%	39.3%	
NYC	New York	Mount Sinai Medical Center ¹⁴	Article 28	46	46	0	18.1%	18.1%	•	18.1%	18.1%	
NYC	New York	NYC-HHC Bellevue Hospital Center	Article 28	330	285	45	21.1%	20.4%	25.2%	19.8%	18.2%	29.1%
NYC	New York	NYC-HHC Harlem Hospital Center	Article 28	52	52	0	21.3%	21.3%		20.7%	20.7%	
NYC	New York	NYC-HHC Metropolitan Hospital Center	Article 28	122	104	18	31.7%	33.8%	5.6%	20.1%	21.1%	8.3%
NYC	New York	New York Gracie Square Hospital, Inc. 15	Article 31	133	133	0	19.2%	19.2%		17.5%	17.5%	
NYC	New York	New York Presbyterian Hospital	Article 28	91	91	0	16.6%	16.6%		17.5%	17.5%	
NYC	New York	New York University Hospitals Center	Article 28	22	22	0	12.9%	12.9%		11.7%	11.7%	
NYC	New York	St. Luke's-Roosevelt Hospital Center	Article 28	110	93	17	16.9%	18.1%	10.9%	17.3%	18.5%	10.9%
NYC	Queens	Episcopal Health Services Inc.	Article 28	43	43	0	19.1%	19.1%		17.3%	17.3%	
NYC	Queens	Jamaica Hospital Medical Center ¹⁶	Article 28	56	56	0	18.3%	18.3%		22.3%	22.3%	
NYC	Queens	Long Island Jewish Medical Center	Article 28	234	212	22	20.7%	21.1%	17.5%	16.0%	16.7%	10.5%
NYC	Queens	NYC-HHC Elmhurst Hospital Center	Article 28	177	151	26	17.7%	18.7%	7.3%	14.4%	14.4%	14.6%
NYC	Queens	NYC-HHC Queens Hospital Center ¹⁷	Article 28	53	53	0	18.9%	18.9%		24.6%	24.6%	
NYC	Queens	New York Flushing Hospital and Medical Center	Article 28	18	18	0	22.9%	22.9%	•	29.2%	29.2%	•
NYC	Richmond	Richmond University Medical Center	Article 28	65	55	10	12.8%	13.3%	10.3%	50.6%	49.0%	58.6%
NYC	Richmond	Staten Island University Hospital ¹⁸	Article 28	35	35	0	16.3%	16.3%		29.1%	29.1%	00.070
Western	Cattaraugus	Olean General Hospital	Article 28	14	35 14	0	14.1%	14.1%	•	6.4%	6.4%	•



Table 5: General and Private Hospital 30-Day Inpatient Readmission and ER Utilization Rates 1

							Metrics Post Discharge⁴					
								Readmiss	on ⁵	ER Utilization ⁷		
	2			•	city (as of 0	•	For discharge cohort (Jul, 2017-Sep, 2017), % Having Psychiatric Readmission within 30 days			Sychiatric ithin 30 days		
Region	County ²	Hospital Name ³	Auspice	Total	Adults	Child	Total	Adult ⁶	Child	Total	Adult	Child
Western	Chautauqua	TLC Health Network	Article 28	20	20	0	12.8%	12.8%		21.3%	21.3%	
Western	Chautauqua	Woman's Christian Assoc. of Jamestown, NY	Article 28	40	30	10	20.0%	22.4%	14.0%	7.3%	7.5%	7.0%
Western	Chemung	St. Joseph's Hospital	Article 28	25	25	0	12.6%	12.6%		7.4%	7.4%	
Western	Erie	Brylin Hospitals, Inc.	Article 31	88	68	20	6.9%	7.8%	4.8%	2.8%	2.0%	4.8%
Western	Erie	Erie County Medical Center ¹⁹	Article 28	136	120	16	13.4%	13.5%	11.1% *	13.7%	13.8%	11.1% *
Western	Monroe	Rochester General Hospital	Article 28	30	30	0	14.6%	14.6%		11.2%	11.2%	
Western	Monroe	The Unity Hospital of Rochester	Article 28	40	40	0	9.0%	9.0%		14.9%	14.9%	
Western	Monroe	Univ of Roch Med Ctr/Strong Memorial Hospital	Article 28	93	66	27	13.1%	13.7%	11.3%	16.8%	15.5%	20.8%
Western	Niagara	Eastern Niagara Hospital, Inc.	Article 28	12	0	12	15.4%		15.4%	3.8%		3.8%
Western	Niagara	Niagara Falls Memorial Medical Center	Article 28	54	54	0	14.1%	14.1%		17.3%	17.3%	
Western	Ontario	Clifton Springs Hospital and Clinic	Article 28	18	18	0	16.1%	16.1%		19.4%	19.4%	
Western	Tompkins	Cayuga Medical Center at Ithaca, Inc.	Article 28	26	20	6	11.8%	12.2%	10.5% *	5.4%	5.4%	5.3% *
Western	Wayne	Newark-Wayne Community Hospital, Inc.	Article 28	16	16	0	17.0%	17.0%		11.3%	11.3%	
Western	Wyoming	Wyoming County Community Hospital	Article 28	12	12	0	14.0%	14.0%		7.0%	7.0%	
Western	Yates	Soldiers & Sailors Memorial Hospital	Article 28	10	10	0	5.9% *	5.9% *		5.9% *	5.9% *	
Statewide Total				5,920	5,140	780	18.4%	19.0%	13.0%	16.7%	16.9%	14.7%

Updated as of May 16, 2018

Source: Concerts, Medicaid, MHARS

Notes:

- 1. Private (Article 31) hospitals are classified as Institutes for Mental Diseases (IMD), and as such, are not reimbursed by Medicaid for inpatient treatment in their facilities for persons aged 22-64.
- 2. Data are presented by county of discharging hospital location and age group (child or adult). If an entity operates more than one hospital and county is not available on the records (e.g., managed care encounters), the discharges and readmissions are assigned to one of the hospitals.
- 3. Hospitals that closed prior to 04/1/2018 are excluded.
- 4. The denominators for the metrics were based on discharges to the community. The discharge cohort has a 6-month lag to allow time for completion of Medicaid claim submissions. The discharges that were no longer qualified for Medicaid services (lost Medicaid eligibility, had Medicare or third party insurance) were excluded from the discharge cohort.
- 5. Readmissions were defined as State PC and Medicaid psychiatric (Article 28 /31) inpatient events occurring within 1 to 30 days after the Article 28 /31 discharge. The readmission was only counted once.
- 6. When the psychiatric unit is a child or adolescent unit, persons aged 21 or younger are counted as a child. For adult units, persons aged 16 or older are counted as adults.
- 7. ER data were extracted from Medicaid claims and encounters only. The numerator included the first Psychiatric ER/CPEP event that occurred within thirty days post discharge.
- 8. Change at Champlain Valley Physicians Hospital Med Ctr. was made to reduce adult beds by 4(from 22 to 18) effective on 5/25/2017.
- 9. Changes at New York Presbyterian Hospital adult capacity reduced by 2 bed from 207 to 205 effective on 11/7/2017
- 10. North Shore University Hospital @ Syosset was not appearing in this report prior to June 2017, due to a Medicaid data matching issue that has now been resolved.
- 11. Changes at Brunswick Hospital Center, Inc. adult capacity expended by 8 bed from 79 to 87 and child capacity reduced by 8 from 45 to 37 effective on 9/9/2016
- 12. Changes at Bronx-Lebanon Hospital Center adult capacity is expanded by 6 bed from 73 to 79 effective on 10/20/2017
- 13. Changes at NYC-HHC Woodhull Medical & Mental Health Ctr. adult capacity is reduced by 23 bed from 135 to 112 effective on 11/30/2017
- 14. Changes at Mount Sinai Medical Center adult capacity is reduced by 30 bed from 76 to 46 effective on 7/1/2016
- 15. Changes at New York Gracie Square Hospital, Inc. adult capacity is reduced by 24 bed from 157 to 133 effective on 9/15/2017
- 16. Changes at Jamaica Hospital Medical Center adult capacity is expanded by 4 bed from 52 to 56 effective on 12/22/2017, updated on 3/20/2018
- 17. Changes at NYC-HHC Queens Hospital Center adult capacity is reduced by 18 bed from 71 to 53 effective on 10/16/2017
- 18. Changes at Staten Island University Hospital adult capacity reduced by 29 bed from 64 to 35 due to one of units has been functionally closed and effective on 7/15/2016
- 19. Changes at Erie County Medical Center adult capacity expended by 4 bed from 116 to 120 effective on 7/19/2017

*Note: This rate may not be stable due to small denominator (less than 20 discharges in the denominator).



Glossary of Services

1. Supported Housing: Supported Housing is a category of community-based housing that is designed to ensure that individuals who are seriously and persistently mentally ill (SPMI) may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence with the community. Supported Housing is not as much considered a "program" which is designed to develop a specific number of beds; but rather, it is an approach to creating housing opportunities for people through the development of a range of housing options, community support services, rental stipends, and recipient specific advocacy and brokering. As such, this model encompasses community support and psychiatric rehabilitation approaches.

The unifying principle of Supported Housing is that individual options in choosing preferred long term housing must be enhanced through:

- Increasing the number of affordable options available to recipients;
- Ensuring the provision of community supports necessary to assist recipients in succeeding in their preferred housing and to meaningfully integrate recipients into the community; and
- Separating housing from support services by assisting the resident to remain in the housing of his choice while the type and intensity of services vary to meet the changing needs of the individual.
- 2. Home and Community Based Services Waiver (HCBS): HCBS was developed as a response to experience and learning gained from other state and national grant initiatives. The goals of the HCBS waiver are to:
 - Enable children to remain at home, and/or in the community, thus decreasing institutional placement.
 - Use the Individualized Care approach to service planning, delivery and evaluation. This
 approach is based on a full partnership between family members and service providers.
 Service plans focus upon the unique needs of each child and builds upon the strengths of
 the family unit.
 - Expand funding and service options currently available to children and adolescents with a diagnosis of serious emotional disturbance and their families.
 - Provide services that promote better outcomes and are cost-effective.

The target population of children eligible for the waiver are children with a diagnosis of serious emotional disturbance who without access to the waiver would be in psychiatric institutional placement. Parent income and resources are not considered in determining a child's eligibility.

The HCBS waiver includes six new services not otherwise available in Medicaid:

• Individualized Care Coordination includes the components of intake and screening, assessment of needs, service plan development, linking, advocacy, monitoring and consultation.



- Crisis Response Services are activities aimed at stabilizing occurrences of child/family crisis where it arises.
- **Intensive In-home Services** are ongoing activities aimed at providing intensive interventions in the home when a crisis response service is not enough.
- **Respite Care** are activities that provide a needed break for the family and the child to ease the stress at home and improve family harmony.
- Family Support Services are activities designed to enhance the ability of the child to
 function as part of a family unit and to increase the family's ability to care for the child in
 the home and in community based settings.
- **Skill Building Services** are activities designed to assist the child in acquiring, developing and addressing functional skills and support, both social and environmental.
- 3. Mobile Integration Teams (MIT): Mobile Integration Teams provide an array of services delivered by multidisciplinary professionals and paraprofessionals to successfully maintain each person in his or her home or community. The intent of this program is to address the social, emotional, behavioral and mental health needs of the recipients and their families to prevent an individual from needing psychiatric hospitalization. Examples of services include, but are not limited to, health teaching, assessment, skill building, psychiatric rehabilitation and recovery support, in-home respite, peer support, parent support and skills groups, crisis services, linkage and referral, outreach and engagement. The population to be served includes children and adolescents, their families, and adults. The services provided by this team can be provided in any setting, including an individual's residence, schools, as well as inpatient or outpatient treatment settings.
- 4. Respite Services: Temporary services (not beds) provided by trained staff in the consumer's place of residence or other temporary housing arrangement. Includes custodial care for a disabled person in order that primary care givers (family or legal guardian) may have relief from care responsibilities. The purpose of respite services is to provide relief to the primary care provider, allow situations to stabilize and prevent hospitalizations and/or longer term placements out of the home. Maximum Respite Care services per Consumer per year are 14 days.
- 5. Outreach: Outreach programs/services are intended to engage and/or assess individuals potentially in need of mental health services. Outreach programs/services are not crisis services. Examples of applicable services are socialization, recreation, light meals, and provision of information about mental health and social services. Another type of service within this program code includes off-site, community based assessment and screening services. These services can be provided at forensic sites, a consumer's home, other residential settings, including homeless shelters, and the streets.
- 6. Assertive Community Treatment (ACT) Program: ACT Teams provide mobile intensive treatment and support to people with psychiatric disabilities. The focus is on the improvement of an individual's quality of life in the community and reducing the need for inpatient care, by providing intense community-based treatment services by an interdisciplinary team of mental health professionals. Building on the successful components of the Intensive Case Management (ICM) program, the ACT program has low staff-outpatient ratios; 24-hour-a-day, seven-day-perweek availability; enrollment of consumers, and flexible service dollars. Treatment is focused on individuals who have been unsuccessful in traditional forms of treatment.
- Advocacy/Support Services: Advocacy/support services may be individual advocacy or systems advocacy (or a combination of both). Examples are warm lines, hot lines, teaching daily



living skills, providing representative payee services, and training in any aspect of mental health services. Individual advocacy assists consumers in protecting and promoting their rights, resolving complaints and grievances, and accessing services and supports of their choice. Systems advocacy represent the concerns of a class of consumers by identifying patterns of problems and complaints and working with program or system administrators to resolve or eliminate these problems on a systemic, rather than individual basis.

- 8. Intensive Case Management (ICM): In addition to providing the services in the general Targeted Case Management program description above, ICM is set at a case manager/client ratio of 1:12. Medicaid billing requirements for the Traditional ICM model requires a minimum of four (4) 15 minute face to-face contacts per individual per month. For programs serving Children and Families, one contact may be collateral. The Flexible ICM model requires a minimum of two (2) 15 minute minimum face-to-face contacts per individual, per month but must maintain a minimum aggregate of 4 face-to-face contacts over the entire caseload. For programs serving Children and Families, 25% of the aggregate contacts can be collaterals.
- 9. Crisis Intervention: Crisis intervention services, applicable to adults, children and adolescents, are intended to reduce acute symptoms and restore individuals to pre-crisis levels of functioning. Examples of where these services may be provided include emergency rooms and residential settings. Provision of services may also be provided by a mobile treatment team, generally at a consumer's residence or other natural setting (not at an in-patient or outpatient treatment setting). Examples of services are screening, assessment, stabilization, triage, and/or referral to an appropriate program or programs. This program type does not include warm lines or hot lines.
- 10. Non-Medicaid Care Coordination: Activities aimed at linking the consumer to the service system and at coordinating the various services in order to achieve a successful outcome. The objective of care coordination in a mental health system is continuity of care and service. Services may include linking, monitoring and case-specific advocacy. Care Coordination Services are provided to enrolled consumers for whom staff is assigned a continuing care coordination responsibility. Thus, routine referral would not be included unless the staff member making the referral retains a continuing active responsibility for the consumer throughout the system of service. Persons with Medicaid may receive services from this program, however the program does not receive reimbursement from Medicaid.
- 11. Recovery Center: A program of peer support activities that are designed to help individuals with psychiatric diagnosis live, work and fully participate in communities. These activities are based on the principle that people who share a common condition or experience can be of substantial assistance to each other. Specific program activities will: build on existing best practices in self-help/peer support/mutual support; incorporate the principles of Olmstead; assist individuals in identifying, remembering or discovering their own passions in life; serve as a clearinghouse of community participation opportunities; and then support individuals in linking to those community groups, organizations, networks or places that will nurture and feed an individual's passions in life. Social recreation events with a focus on community participation opportunities will be the basis for exposing individuals to potential passion areas through dynamic experiences, not lectures or presentations.
- 12. Self Help Program: To provide rehabilitative and support activities based on the principle that people who share a common condition or experience can be of substantial assistance to each other. These programs may take the form of mutual support groups and networks, or they may be more formal self-help organizations that offer specific educational, recreational, social or other program opportunities.



- 13. Clinic Treatment: A clinic treatment program shall provide treatment designed to minimize the symptoms and adverse effects of illness, maximize wellness, and promote recovery. A clinic treatment program for adults shall provide the following services: outreach, initial assessment (including health screening), psychiatric assessment, crisis intervention, injectable psychotropic medication administration (for clinics serving adults), psychotropic medication treatment, psychotherapy services, family/collateral psychotherapy, group psychotherapy, and complex care management. The following optional services may also be provided: developmental testing, psychological testing, health physicals, health monitoring, and psychiatric consultation. A clinic treatment program for children shall provide the following services: outreach, initial assessment (including health screening), psychiatric assessment, crisis intervention, psychotropic medication treatment, psychotherapy services, family/collateral psychotherapy, group psychotherapy, and complex care management. The following optional services may also be provided: developmental testing, psychological testing, health physicals, health monitoring, psychiatric consultation, and injectable psychotropic medication administration.
- 14. Home-Based Crisis Intervention: The Home-Based Crisis Intervention Program is a clinically oriented program with support services by a MSW or Psychiatric Consultant which assists families with children in crisis by providing an alternative to hospitalization. Families are helped through crisis with intense interventions and the teaching of new effective parenting skills. The overall goal of the program is to provide short-term, intensive in-home crisis intervention services to a family in crisis due to the imminent risk of their child being admitted to a psychiatric hospital. The target population for the HBCI Program is families with a child or adolescent ages 5 to 17 years of age, who are experiencing a psychiatric crisis so severe that unless immediate, effective intervention is provided, the child will be removed from the home and admitted to a psychiatric hospital. Families referred to the program are expected to come from psychiatric emergency services.
- **15. Crisis Housing/Beds (Adult):** Non-licensed residential program, or dedicated beds in a licensed program, which provide consumers a homelike environment with room, board and supervision in cases where individuals must be removed temporarily from their usual residence.
- **16. Children & Youth Crisis/Respite:** The intent of the crisis/respite program is to provide a short-term, trauma-sensitive, safe and therapeutic living environment, and crisis support to children and adolescents with serious emotional disturbances, their families and residential service providers.

The goal of the program is to:

- Stabilize the crisis situation and support the family or service provider's efforts to maintain the child in his or her current residence;
- Provide immediate access to treatment services:
- Increase engagement with peer and family support services;
- Improve the family/caregiver's ability to respond to the environmental/social stressors that precipitated the need for respite; and
- Decrease the inappropriate use of emergency departments, inpatient hospitalizations and/or other out-of-home placements.

This program is intended to be an opportunity to provide intense support and guidance to the youth and their family/caregivers so as to prevent a reoccurrence of the situation preceding the admission.

17. Transportation: The provision of transportation to and from facilities or resources specified in the Consumer's individual treatment plan as a necessary part of his/her service for mental disability. This includes all necessary supportive services for full and effective integration of the Consumer into community life.



- 18. Flexible Recipient Service Dollars: Flexible Recipient Service Dollars are not based on a particular fiscal model and are available to provide for a recipient's emergency and non-emergency needs. These funds are to be used as payment of last resort. The use of the service dollars should include participation of the recipient of services, who should play a significant role in the planning for, and the utilization of, service dollars. Services purchased on behalf of a recipient, such as Respite or Crisis Services, should be reported using this Service Dollar program code. Examples of services may include housing, food, clothing, utilities, transportation and assistance in educational, vocational, social or recreational and fitness activities, security deposits, respite, medical care, crisis specialist, homemakers and escorts. This program code cannot be allocated for AHSCM, ICM, SCM, BCM, ACT, RTF Transition Coordinators or Home and Community Based Waiver Services. Agency administrative costs allocated to the operating costs of this program via the Ratio Value allocation methodology are redistributed to other OMH programs in the CFR.
- 19. Family Support Services: Family support programs provide an array of formal and informal services to support and empower families with children and adolescents having serious emotional disturbances. The goal of family support is to reduce family stress and enhance each family's ability to care for their child. To do this, family support programs operate on the principles of individualized care and recognizing every child and family is unique in their strengths and needs. Connecting family members to other families with children with serious emotional problems helps families to feel less isolated and identify their own strengths. Family support programs ideally provide the following four core services: family/peer support, respite, advocacy, and skill building/educational opportunities.
- **20. OnTrackNY:** OnTrackNY program is intended for early identification of psychotic symptoms and the development of early intervention strategies to mitigate the onset of psychotic disorders. These programs generally focus on serving transition-aged youth and young adults experiencing their first episode of psychosis.
- **21. On-Site Rehabilitation:** Program objective is to assist mentally ill adults living in adult congregate care settings, supervised or supported living arrangements to achieve their treatment and community living rehabilitation goals. Services include one or a combination of:
 - (1) consumer self-help and support interventions:
 - (2) community living;
 - (3) academic and/or social leisure time rehabilitation training and support services.

Services are provided either at the residential location of the resident or in the natural or provideroperated community and are provided by a team that is either located at the residential site or which functions as a mobile rehabilitation team traveling from site to site.

- **22. Pathway Home Teams:** Pathway Home teams are multi-disciplinary, staffed by masters-level clinicians, case managers, registered nurses, and peers. Teams follow the evidence-based practice of the critical time intervention model of care, engaging clients intensively during the first 30 days. The team will work clients until they have settled back into the community and are linked with the services they need. While every situation is unique, this takes about six to nine months on average.
- 23. Family Resource Centers: Family Resource Centers aim to strengthen secure attachment between parent and child relationships, and to promote healthy social-emotional development in children age five and under from high risk families residing in eight communities in the Bronx and Harlem.
- 24. High Fidelity Wraparound (HFW) is a youth-guided, family-driven planning process that allows youth and their family achieve treatment goals that they have identified and prioritized, with



assistance from their natural supports and system providers, while the youth remains in his or her home and community setting.

- 25. Mobile Residential Support Teams focus on transitioning adults living in supported housing apartments into community living. Once these individuals are living in the community, Mobile Residential Support Teams visit them in their homes to help ensure that their basic needs are being met. Teams assist with discharge and community residential support for high risk individuals such as those with co-morbid medical conditions, dual diagnoses of mental illness and/or developmental disability.
- **26. Long Stay Teams** are services that assist with the transition of long stay individuals in State PC or residential settings into structured community settings. Long stay is defined as an adult with a State PC or residential length of stay exceeding one year.